

FILED

SEP 26 2007

RICHARD M. WILSON
CLERK, U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIAUNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIAPABLO PIÑA,
RALPH TRUJILLO,
EDDIE GARCIA,

Plaintiff,

CASE NO. 07-4989 SI (PR)

vs.

DIRECTOR, PRISON,
WARDEN, ROBERT HOREL,
ASSOCIATE WARDEN, CYNTHIA SCARLETTA,
ET AL,

Defendant.

**PRISONER'S
APPLICATION TO PROCEED
IN FORMA PAUPERIS**

I, PABLO PIÑA D-28079, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes ___ No X

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: N/A Net: N/AEmployer: N/A

ORIGINAL

1 If the answer is "no," state the date of last employment and the amount of the gross and net
 2 salary and wages per month which you received. (If you are imprisoned, specify the last
 3 place of employment prior to imprisonment.)

4 ITS BEEN OVER 35 YEARS I COULDN'T REMEMBER EVEN IF I TRIED.

5 _____
 6 _____

7 2. Have you received, within the past twelve (12) months, any money from any of the
 8 following sources:

- 9 a. Business, Profession or Yes ____ No ☒
 10 self employment
- 11 b. Income from stocks, bonds, Yes ____ No ☒
 12 or royalties?
- 13 c. Rent payments? Yes ____ No ☒
 14 d. Pensions, annuities, or Yes ____ No ☒
 15 life insurance payments?
- 16 e. Federal or State welfare payments, Yes ____ No ☒
 17 Social Security or other govern-
 18 ment source?

19 If the answer is "yes" to any of the above, describe each source of money and state the amount
 20 received from each.

21 N/A
 22 _____

23 3. Are you married? Yes ____ No ☒

24 Spouse's Full Name: N/A

25 Spouse's Place of Employment: N/A

26 Spouse's Monthly Salary, Wages or Income:

27 Gross \$ N/A Net \$ N/A

28 4. a. List amount you contribute to your spouse's support: \$ N/A

1 b. List the persons other than your spouse who are dependent upon you for
 2 support and indicate how much you contribute toward their support. (NOTE:
 3 For minor children, list only their initials and ages. DO NOT INCLUDE
 4 THEIR NAMES.).

5 N/A
 6 _____

7 5. Do you own or are you buying a home? Yes ___ No ✓

8 Estimated Market Value: \$ N/A Amount of Mortgage: \$ N/A

9 6. Do you own an automobile? Yes ___ No ✓

10 Make N/A Year N/A Model N/A

11 Is it financed? Yes N/A No N/A If so, Total due: \$ N/A

12 Monthly Payment: \$ N/A

13 7. Do you have a bank account? Yes N/A No ✓ (Do not include account numbers.)

14 Name(s) and address(es) of bank: _____

15 N/A

16 Present balance(s): \$ N/A

17 Do you own any cash? Yes N/A No ✓ Amount: \$ N/A

18 Do you have any other assets? (If "yes," provide a description of each asset and its estimated
 19 market value.) Yes ___ No ✓

20
 21 8. What are your monthly expenses?

22 Rent: \$ 0 Utilities: 0

23 Food: \$ 0 Clothing: 0

24 Charge Accounts:

25	Name of Account	Monthly Payment	Total Owed on This Acct.
26	<u>0</u>	\$ <u>0</u>	\$ <u>0</u>
27	<u>0</u>	\$ <u>0</u>	\$ <u>0</u>
28	<u>0</u>	\$ <u>0</u>	\$ <u>0</u>

1 9. Do you have any other debts? (List current obligations, indicating amounts and to
2 whom they are payable. Do not include account numbers.)

3 RESTITUTIONS / COURT COSTS.
4 _____

5 10. Does the complaint which you are seeking to file raise claims that have been presented
6 in other lawsuits? Yes ___ No ✓

7 Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in
8 which they were filed.
9 _____
10 _____

11 I consent to prison officials withdrawing from my trust account and paying to the court
12 the initial partial filing fee and all installment payments required by the court.

13 I declare under the penalty of perjury that the foregoing is true and correct and
14 understand that a false statement herein may result in the dismissal of my claims.

15
16 9/10/07

17 DATE

José Pina

18 SIGNATURE OF APPLICANT
19
20
21
22
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24
25
26
27
28

Case Number: _____

CERTIFICATION OF FUNDS
IN
PRISONER'S ACCOUNT

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of Pablo Pina D28079 for the last six months at Pelican Bay State Prison where he is confined.

I further certify that the average deposits each month to this prisoner's account for the most recent 6-month period were \$3.34 and the average balance in the prisoner's account each month for the most recent 6-month period was \$3.90. (20% = \$0.78)

Dated: 9/12/07

[Signature]
Authorized officer of the institution



THE WITHIN INSTRUMENT IS A CORRECT
COPY OF THE TRUST ACCOUNT MAINTAINED
BY THIS OFFICE.
ATTEST: 9-12-07
CALIFORNIA DEPARTMENT OF CORRECTIONS
BY *[Signature]*
TRUST OFFICE

CALIFORNIA DEPARTMENT OF CORRECTIONS

PELICAN HAY STATE PRISON

INMATE TRUST ACCOUNTING SYSTEM

INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: MAR. 01, 2007 THRU SEP. 11, 2007

ACCOUNT NUMBER : D28079
 ACCOUNT NAME : PINA, PABLO
 PRIVILEGE GROUP: D

BED/CELL NUMBER: DF04L 0000001021
 ACCOUNT TYPE: I

TRUST ACCOUNT ACTIVITY

DATE	TRAN CODE	DESCRIPTION	COMMENT	CHECK NUM	DEPOSITS	WITHDRAWALS	BALANCE
03/01/2007		BEGINNING BALANCE					0.00
07/05	D300	CASH DEPOSIT	0064 #003		20.00		20.00
08/02	FC05	DRAW-FAC 5	0555 D4			20.00	0.00
08/28	FR01	CANTEEN RETUR	700986			3.35	3.35
08/29	W516	LEGAL COPY CH	1009			0.40	2.95

TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRANSACTIONS TO BE POSTED
0.00	20.00	17.05	2.95	0.00	0.00

CURRENT
 AVAILABLE
 BALANCE

2.95



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 BY THIS OFFICE.

ATTEST: 9-12-07

CALIFORNIA DEPARTMENT OF CORRECTIONS

BY J. Kleppin
 TRUST OFFICE